

NEIGHBORHOOD ASSISTANCE PROGRAM FINAL REPORT

	nal report must be submitted an pleted.	at the end	of the fundraising period	d and after all activities	associated	I with the project	have been
ORGANIZATION NAME						PROJECT NUMBER	
NAP BUDGET IN DOLLARS			AUTHORIZED NAP CREDITS			FUNDRAISING PERIOD	
TOTAL NAP CONTRIBUTIONS RECEIVED TO DATE		TOTAL NAP CONTRIBUTIONS SPENT TO DATE		TOTAL NAP CREDITS USED		TOTAL NAP CREDITS UNUSED (THESE CREDITS WILL BE RECAPTURED BY NAP)	
PERFORMANCE TARGETS						TOTAL # PROJECTED	ACTUAL # SUCCESSFUL
Have all tax credit applications for credits used been submitted to our office?						☐ YES	□ NO
2.	2. If your project used \$25,000 or more in tax credits, an independent compliance and financial audit of only the NAP fund must be submitted to our office. If required, by what date do you plan to submit your audit?						
3. As a result of the tax credits have you retained or created any jobs NOT reported in the performance target section? If so, how many createdretained.							
PLEASE NOTE ANY SUCCESSES, PROBLEMS OR QUESTIONS. (ATTACH ANOTHER SHEET, IF NEEDED.)							
PROJECT DIRECTOR SIGNATURE						DATE	